Filk

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



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FOR INSTRUCTIONS, SEE BACK OF FORM
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_2008 JAN 18 AH 7: 59

COMMITTEE NAME (Must be same as on Statement of Org			
I State of Org	ganization)	140	
Rob Grove for City Council Committee		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	2)State PAC (3)State Party	DR-2 (Rev. 07/2007) For Office Use O	DISCLOSURE REPORT
	The state of the s	Comm #	13768
CANDIDATE COMMITTEES ONLY: Candidate Name			75760
Rob Grove	Political Party (if applicable) NP	Scanned	
Office Sought		Computer N.	n
City Council Ward 2	District (if Senate or House)	Audited	
ate reports are subject to possible civil and criminal penalties. Pu	rsuant to Iowa Code sections 68B.32A(7) and	d 68A.401(3), the ca	andidate, for a
Himberly S. Love	5.50	1/101	\
SIGNATURE OF PERSON FILING REPORT	222-0278	1/12/08	<u> </u>
	TELEPHONE	DATE S	IGNED
AM FILING A 01/10/08	REPORT FOR (1) ELECTION /(2)NC		
(report date)	Indicate by #	ON-ELECTION YE	AR.
CHECK IF AMENDMENT TO REPORT DATED 11/01/07	indicate by #		
		Election is held	
STATEMENT OF CASH ON HAND			
STATEMENT OF CASH ON HAND ASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the ca of the last reporting period or must be zero if this is firs	al of all funds held by the	s 525.41	
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For instructions, See Back of Form

Resention

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COM	MITTEE	NAME (Must be same as on Statement of Organization)
	_	

Rob Grove for City Council Committee

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS			
CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCI OSURE BOARD

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF F FUNI RAISI
	ID#	Robert Carlson			INCO
9/24/07	CK#	WDM IA	Friend	\$ 50.00	~
	ID#	David Edelstien	- Trond		ļ
9/30/07	CK#	Urbandale IA	Friend	50.00	V
	ID#	Tom Daniels	Ticid	 	
10/02/07	CK#	WDM IA		50.00	V
	ID#		Friend		
10/02/07	CK#	Scott Schecher WDM IA	Finiand	50.00	~
	ID#	Paul Moran	Friend		
10/02/07	CK#	WDM IA	Friend	50.00	~
	ID#	Gary Lawrence	FILENO		
002/07	CK#	Carisle IA	Friend	100.00	V
	ID#	Robert Joice			
10/18/07	CK#	Peoria AZ	Brother-in-law	75.00	~
	ID#	Stephen Ripley	Diomei-III-law		
0/18/07	CK#	WDM IA	Friend	50.00	~
	ID#	Terry Manning			
10/18/07	CK#	WDM IA	Friend	50.00	V
	ID#	Nancy Lodermeier	Priend		
0/18/07	CK#	WDM IA	Friend	50.00	V
			SUB-TOTAL		*****
			Ī	\$ 710.00	
		TOTAL (if last page	of this schedule)		

TOTAL (if last page of this schedule)

Page 1 of (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

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3.73 80		20 ON 150	Acres 1	0.00
17.7	F 3415 1 444	800 av 9	1 4 3 3	
75-75	A LANGE CONTRACTOR	130 130	ACCURAGE.	9 1

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Rob Grove for City Council Committee

A (Rev. 07/03)	MONETARY RECEIPTS
SCHEDULE	

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Rob Grove		†	1,100
10/18/07	CK#		self	\$313.53	
	ID#			+	
	CK#				
	ID#				<u> </u>
	CK#				
	ID#			ļ'	
	CK#		!	!	
	ID#		<u> </u>	<u> </u>	<u> </u>
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			SUB-TOTAL		
			GOD-TOTAL	\$ 313.53	ı

TOTAL (if last page of this schedule)

(for Schedule A)

1023.53

of 2

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE В MONETARY (Rev. 07/03) **EXPENDITURES**

> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Rob Grove for City Council Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/05/07	ID# CK#	Comp USA Clive IA	Paper/Ink	\$ 34.96
0/05/07	ID# CK#	Comp USA Clive IA	Ink	13.77
0/06/07	ID# CK#	Comp USA Clive IA	Paper/Ink	41.03
0/1 2/07	ID#	FedEx Kinkos Clive IA	Broochures	94.53
0/17/07	ID# CK#	Signs Now Clive IA	Yard Signs	755.26
0/25/07	ID# CK#	Des Moines Register Des Moines IA	Ad	75.00
0/25/07	ID# CK#	Web Listings Niagara Falls NY	Web site	8.95
	ID# CK#			
			SUB-TOTAI	- \$ 1023.50

TOTAL (if last page of this schedule)

\$ 1023.50

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	۸f	1
9-		vi	